

For Office Use Only

Fee \$30.00 - Account No. 101.370.6760 No. of Vehicles: \_\_\_\_\_ Receipt No.: \_\_\_\_\_ License No.: \_\_\_\_\_

Date Application received \_\_\_\_\_ Effective Date of License: February 1, \_\_\_\_\_ to January 31, \_\_\_\_\_



## Application for INDIVIDUAL Waste Tire Transporter License – City of Racine

License Period is February 1-January 31

**Form must be submitted by December 31 of the year prior to being issued.**

The undersigned hereby applies for a license to transport waste tire(s) and for that purpose represents the following information to be true:

Applicant Name: \_\_\_\_\_  
Please Print

Business Name: \_\_\_\_\_

Applicant Address (Home): \_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
City State Zip Code

Applicant Date of Birth: \_\_\_\_\_

Business Telephone Number: \_\_\_\_\_

Applicant Telephone Number: \_\_\_\_\_

Applicant Cell Phone Number: \_\_\_\_\_

Address within the City at which all required records will be kept: \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

Have you (applicant) had a license issued under this section (license to be a waste tire generator OR transporter) denied, revoked, or suspended in the last three (3) years? Yes  No

Description of Vehicle	Vehicle Manufacturer	Vehicle Identification Number	License Number	Gross Weight	Registered Owner

Signature of Applicant: \_\_\_\_\_

(Individual)  
 REV. 11/14

Check for License Fee Submitted